AO 240 (Rev. 10/03)
DELAWARE (Rev. 4/05)

FILED
OCT 17 2006
U.S. DISTRICT COURT
DISTRICT OF DELAWARE

UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARE

James St. Louis
Plaintiff

V.

Ralph Heuern et al
Defendant(s)

APPLICATION TO PROCEED WITHOUT PREPAYMENT OF FEES AND AFFIDAVIT

CASE NUMBER: 06-641

I, James St. Louis declare that I am the (check appropriate box)

☑ Petitioner/Plaintiff/Movant ☐ Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☑ Yes ☐ No (If "No" go to Question 2)

   If "YES" state the place of your incarceration DCC 1181 Paddock Rd Smyrna De.

   Inmate Identification Number (Required): 446518

   Are you employed at the institution? No Do you receive any payment from the institution? No

   Attach a ledger sheet from the institution of your incarceration showing at least the past six months' transactions

2. Are you currently employed? ☐ Yes ☑ No

   a. If the answer is "YES" state the amount of your take-home salary or wages and pay period a and give the name and address of your employer. NONE

   b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. 12/9/2005

3. In the past 12 twelve months have you received any money from any of the following sources?

a.	Business, profession or other self-employment	☐ Yes	☑ No
b.	Rent payments, interest or dividends	☐ Yes	☑ No
c.	Pensions, annuities or life insurance payments	☐ Yes	☑ No
d.	Disability or workers compensation payments	☐ Yes	☑ No
e.	Gifts or inheritances	☐ Yes	☑ No
f.	Any other sources	☐ Yes	☑ No

If the answer to any of the above is "YES" describe each source of money and state the amount received *AND* what you expect you will continue to receive. NONE

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4. Do you have any cash or checking or savings accounts? • • Yes ✓ No

If "Yes" state the total amount $ NONE

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?

• • Yes ✓ No

If "Yes" describe the property and state its value.

NONE

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, *OR* state *NONE* if applicable.

None

I declare under penalty of perjury that the above information is true and correct.

10/6/2006 — DATE

James St. Louis — SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

DELAWARE CORRECTIONAL CENTER
SUPPORT SERVICES OFFICE
MEMORANDUM

TO: James St. Louis SBI#: 446518 06-641

FROM: Stacy Shane, Support Services Secretary

RE: **6 Months Account Statement**

DATE: October 11, 2006

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DISTRICT OF DELAWARE

Attached are copies of your inmate account statement for the months of April 1, 2006 to September 30, 2006

The following indicates the average daily balances.

MONTH	AVERAGE DAILY BALANCE
April	0
May	0
June	0
July	0
Aug	0
Sept	0

Average daily balances/6 months: 0

Attachments
CC: File

Stacy Shane 10/11/06

[signature] 10/11/06

CERTIFICATE

(Incarcerated applicants only)

(To be completed by the institution of incarceration)

I certify that the applicant named herein has the sum of $ Ø on account his/her credit at (name of institution) Delaware Correctional Center.

I further certify that the applicant has the following securities to his/her credit: (4084)

I further certify that during the past six months the applicant's average monthly balance was $ Ø and the average monthly deposits were $ Ø

10/11/06
Date

Stacy Shane
Signature of Authorized Officer

(NOTE THE REQUIREMENT IN ITEM 1 FOR THE INMATE TO OBTAIN AND ATTACH LEDGER SHEETS OF ACCOUNT TRANSACTIONS OVER THE PAST SIX MONTH PERIOD. LEDGER SHEETS ARE NOT REQUIRED FOR CASES FILED PURSUANT TO 28:USC §2254)

RECEIVED-D.C.C.

OCT 11 2006

SUPPORT SERVICES MANAGER

Individual Statement

Date Printed: 10/11/2006

For Month of April 2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	$0.00
00446518	StLouis	James				

Current Location: 22 **Comments:**

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo	SourceName
Supplies-MailP	4/11/2006	$0.00	$0.00	($3.37)	$0.00	248342		INDIGENT 4/3/06	
Supplies-MailP	4/19/2006	$0.00	$0.00	($5.00)	$0.00	251497		4/6/06	

Ending Mth Balance: **$0.00**

Total Amount Currently on Medical Hold: $0.00

Total Amount Currently on Non-Medical Hold: ($40.84)

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DISTRICT OF DELAWARE

Individual Statement

Date Printed: 10/11/2006

For Month of May 2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	$0.00
00446518	StLouis	James				

Current Location: 22

Comments:

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo	SourceName
Supplies-MailP	5/10/2006	$0.00	$0.00	($3.37)	$0.00	261880		INDIGENT 5/1/06	
				Ending Mth Balance:	$0.00				

Total Amount Currently on Medical Hold: $0.00

Total Amount Currently on Non-Medical Hold: ($40.84)

Individual Statement

Date Printed: 10/11/2006

For Month of June 2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	$0.00
00446518	StLouis	James				
Current Location:	22	Comments:				

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo	SourceName
Supplies-MailP	6/1/2006	$0.00	$0.00	($5.00)	$0.00	273130		5/18/06	
Supplies-MailP	6/1/2006	$0.00	$0.00	($2.31)	$0.00	273131		5/18/06	
Supplies-MailP	6/16/2006	$0.00	$0.00	($3.11)	$0.00	280411		INDIGENT 6/5/06	
Supplies-MailP	6/19/2006	$0.00	$0.00	($0.63)	$0.00	281033		6/13/06	
Supplies-MailP	6/29/2006	$0.00	$0.00	($0.63)	$0.00	285491		6/12/06	
Supplies-MailP	6/30/2006	$0.00	$0.00	($0.87)	$0.00	285806		6/26/06	
				Ending Mth Balance:	$0.00				

Total Amount Currently on Medical Hold: $0.00

Total Amount Currently on Non-Medical Hold: ($40.84)

Individual Statement

Date Printed: 10/11/2006

For Month of July 2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	$0.00
00446518	StLouis	James				
Current Location: 22		Comments:				

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo	SourceName
Supplies-MailP	7/13/2006	$0.00	$0.00	($2.95)	$0.00	291404		INDIGENT 7/5/06	

Ending Mth Balance: **$0.00**

Total Amount Currently on Medical Hold: $0.00

Total Amount Currently on Non-Medical Hold: ($40.84)

Individual Statement

Date Printed: 10/11/2006

For Month of August 2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	$0.00
00446518	StLouis	James				
Current Location:	22	Comments:				

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo	SourceName
Supplies-MailP	8/9/2006	$0.00	$0.00	($3.81)	$0.00	303788		INDIGENT 8/1/06	

Ending Mth Balance: **$0.00**

Total Amount Currently on Medical Hold: $0.00

Total Amount Currently on Non-Medical Hold: ($40.84)

Individual Statement

Date Printed: 10/11/2006

For Month of September 2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	$0.00
00446518	StLouis	James				
Current Location:	22	Comments:				

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo	SourceName
Supplies-MailP	9/20/2006	$0.00	$0.00	($3.73)	$0.00	321819		INDIGENT 9/5/06	
				Ending Mth Balance:	$0.00				

Total Amount Currently on Medical Hold: $0.00

Total Amount Currently on Non-Medical Hold: ($40.84)